

<b>CCC-709</b> (08-20-02)  <b>U.S. DEPARTMENT OF AGRICULTURE</b> Commodity Credit Corporation  <b>DIRECT LOAN DEFICIENCY PAYMENT AGREEMENT</b>  <i>See Page 2 for Privacy Act and Public Burden Statements.</i>	1. Name, Address & ID No. of Contact Producer   Telephone Number (Area Code) 2. Crop Year      3. Commodity/Class/Variety/Type
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------

Use this form **BEFORE** harvest or ginning if you choose to receive LDP payments based on date of delivery for grain or date of ginning for cotton when you will lose title, control, and risk of loss (beneficial interest) at the time of harvest.

**PART A - TERMS AND CONDITIONS (Check the applicable box in Items 4 through 7)**

	YES	NO	INITIALS
4. Will any of this commodity be stored on the farm that is not temporary storage or for drying purposes? If "YES", this agreement becomes null and void for that quantity only and you must request LDP on CCC-633 LDP before you lose beneficial interest in that quantity.			
5. Does more than one producer have an interest in the quantity for this request? If "YES", all producers <b>must</b> sign this request.			
6. Will all producers requesting this LDP have title control, and risk of the loss (beneficial interest) in accordance with 7 CFR Parts 1421 and 1427, as applicable (1) at time of ginning for cotton gin direct LDP; or (2) at time of harvest for all other LDP requests?			
7. Will this commodity be produced by all producers requesting this LDP?			

**PART B - APPLICABLE PRODUCTION**

8. CHECK	9. PRODUCTION UNIT	10. FARM NUMBER(S)	11. INITIALS
	A. Specific Quantity: <i>(Please indicate specific quantity)</i>		
	B. All		
	C. All quantity delivered to a specific location: <i>(Please indicate delivery location)</i>		
	D. Only quantities delivered for immediate sales. Any quantity delivered for storage must be covered by CCC-633 LDP before loss of beneficial interest.		
	E. Other: <i>(Please provide description)</i>		

**PART C - PRODUCER SIGNATURES AND CERTIFICATION**

I certify that all information entered on this form is true and correct. By completing and reviewing Part A and by signing this form the producer(s) ("Producer") hereby enters into this agreement with the Commodity Credit Corporation (CCC) with respect to the commodity described in Part B and agrees that the loan deficiency payment (LDP) rate in effect for the applicable commodity: (1) for upland cotton on the date of ginning; or (2) for all other commodities on the date of delivery to the processor, buyer, warehouse, or cooperative if the commodity is delivered directly from the field to the processor, buyer, warehouse, or cooperative. The producer further understands that with respect to the commodity described in Part B: (1) to receive payment for the commodity, a request for payment must be made at the County FSA Office where the farm records are kept; (2) that if the commodity is delivered to a farm storage, except for temporary storage or immediate drying, this agreement becomes null and void and a CCC-633 LDP for grain or CCC-Cotton AA for cotton must be requested before the producer loses beneficial interest in the commodity; (3) any false claim or statement made may lead to civil liability or criminal prosecution; (4) this LDP may be selected for spot check and the producer will be required to provide supplemental documents to determine program eligibility; (5) this agreement remains in force until such time it is revised or terminated on or before the date of ginning for cotton or date of harvest for all other requests; (6) that the producer agrees to forgo a commodity loan on the quantity requested for LDP unless a quantity is denied LDP due to payment limitation and that the producer may not repay or refund any LDP amount in order to obtain a commodity loan; (7) CCC may require copies of sales contract for the production represented by this application; (8) this application is subject to determination by CCC of the Producer's eligibility to receive LDP, and that this application and CCC's determination are subject to 7 CFR Part 1427 or 1421, as applicable; (9) CCC shall require the refund of the LDP amount, plus interest from the date of payment if the producer is later determined by CCC to be ineligible for the LDP; and (10) CCC shall assess liquidated damages in accordance with 7 CFR Part 1427 or 1421, as applicable, if the producer misrepresented the eligible commodity indicated above.

12. Signature of Producer(s)	13. Share (%)	14. Date (MM-DD-YYYY)	15. Signature of Producer(s)	16. Share (%)	17. Date (MM-DD-YYYY)

**PART D - APPROVAL**

18. Approved for CCC By:	20. Date (MM-DD-YYYY)	21. Name and Address of County FSA Office
19. Disapproved for CCC By:		

10

23 Date Delivered, Harvested, or Ginned	24. CCC-Determined Value - LDP Rate (County FSA Office Use)	25. Quantity Requested	23. Date Delivered, Harvested, or Ginned	24. CCC-Determined Value - LDP Rate (County FSA Office Use)	25. Quantity Requested
-----------------------------------------------	----------------------------------------------------------------------	---------------------------	------------------------------------------------	----------------------------------------------------------------------	---------------------------

[illegible]

26. REMARKS AND REASONS FOR DISAPPROVAL, AS APPLICABLE:	

**NOTE:** The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is 7 CFR Parts 1421 and 1427. The information will be used to determine eligibility and the amounts of program benefits. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in determination of ineligibility for program benefits. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0129. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**